

REAL ESTATE APPRAISER EXAMINATIONS

LICENSURE/CERTIFICATION EXAMINATION APPLICATION

ARKANSAS 2006

Please read all instructions in the Candidate Information Booklet before completing this application. Print legibly or type all requested information. Applications that are incomplete, illegible, or do not contain the correct fees will be returned unprocessed.

Return the completed application, signed affidavits and fees to:

Arkansas Appraiser
Licensing and
Certification Board
101 East Capitol
Suite 430
Little Rock, AR
72201

This information constitutes part of the licensure/certification application process for those candidates who successfully pass the Arkansas Real Estate Appraiser Examinations and must be complete. The speed with which your licensure/certification application is processed and license/certificate is issued depends directly upon the accuracy of the information provided on this application.

1. Name: _____
Last Name Jr., III, etc.
- _____ First Name _____ Middle Name
2. Sex: ____ Male 3. SSN: _____ 4. Birthdate: _____
____ Female Month, Day, Year
5. Residence: _____, _____
House Number, Residence Street Suite/Apt.
- _____ City _____ State _____ Zip Code
- _____ County 6. Home Phone: () _____
Work Phone: () _____
7. Personal Mailing Address: _____
Leave blank if same as above
- _____ City _____ State _____ Zip Code
- _____ County
8. ____ Yes/ ____ No Have you ever been registered, licensed, or certified in another state as an appraiser? If your answer to this question is Yes, follow the directions below:
If Yes, what state or states: _____
Under what name: _____
9. ____ Yes/ ____ No Have you ever held or do you hold an appraiser license, or certification in Arkansas? If yes, give your license or certification number : _____
Under what name(s): _____
10. ____ Yes/ ____ No Are you a high school graduate or holder of a General Education Development Certificate?
11. ____ Yes/ ____ No Have you ever (1) been convicted of any criminal offense, (2) pled *nolo contendere* to any criminal offense, (3) been granted first offender treatment upon being charged with any offense?
12. ____ Yes/ ____ No Have you ever been disciplined by the Arkansas Appraiser Licensing & Certification Board or any state or federal licensing agency or authority which regulates any profession? (Disciplinary actions include but are not limited to such actions as a reprimand, a suspension, a revocation, a fine, or any restriction placed on your right to operate as a licensee.)
13. ____ Yes/ ____ No Are there any criminal charges or licensing disciplinary proceedings pending against you at this time?

14. I am applying for a license/certification as a ____ Arkansas Resident ____ NonResident

15. TEST (Check One) _____ State License
_____ State Certified Residential
_____ State Certified General

16. TEST CENTER _____ Little Rock (*only*)

17. Saturday Test _____ April 1, 2006 (**Filing deadline February 6, 2006**)
Dates _____ October 7, 2006 (**Filing deadline August 7, 2006**)

18. Special Requests (A letter is required for all Special Requests. See Instructions in the Candidate Information Booklet)

Non Saturday Test Administration for Religious reasons
Special Disabilities test administration accommodations

19. FEES: (Write in all that apply and total all fees)

A. **\$100.00** Examination Fee (**must be cashier's check or money order made payable To the Professional Examination Service**)

B. **\$125.00** Application Fee (**can be personal or business check made payable to the Arkansas Appraiser Licensing Board**)

\$ _____ TOTAL AMOUNT DUE

20. By signing this application, I agree to the conditions contained in the Real Estate Appraiser Examination Program Candidate Information Booklet, certify that I am the person whose name and address appear on this application, and certify that all information which I have given on this application form and accompanying documents is true, correct, and complete.

Applicant's Signature

Date